

Interdepartmental Regulation of Childrens Residential Facilities

Closed Applications by Locality (Alpha)

Report Date: 8/30/2006

Chesterfield

NAME: H.O.P.E. HOUSE, INC. Phone: (804)675-1060 ID: 2364 Closure Reason:: Involuntary
Physical 6500 N. STEVENS HOLLOW DRIVE Mailing 6500 N. STEVENS HOLLOW DRIVE Closed Date:
Address: Address: 6/7/2006
Lead Agency: DMHMRSAS Capacity: 5 Age Served: 12 to 18 Gender Served: Female
Regulatory Authority: Regulator: RALPH E SROUFE -(804)786-9302
Categories: Facility for Mentally Ill/Emotionally Disturbed

Chesterfield

NAME: HARGROVE OLIVER PARKER ENTERPRISE, Phone: (804)261-9878 ID: 2531 Closure Reason:: Voluntary
Physical 5401 MISTYHILL ROAD Mailing PO BOX 74235 Closed Date:
Address: Address: 7/20/2006
Lead Agency: DSS Capacity: 10 Age Served: 18 to 22 Gender Served: Both
Regulatory Authority: Regulator: Ms. CONNIE MCHALE -(804)726-7666
Categories: Independent Living Program

Chesterfield

NAME: THE SEEDS OF ABRAHAM Phone: (804)275-3308 ID: 2532 Closure Reason:: Involuntary
Physical 3601 COGBILL ROAD Mailing 1500 BROOK ROAD Closed Date:
Address: Address: 3/6/2006
Lead Agency: DSS Capacity: 7 Age Served: 17 to 20 Gender Served: Male
Regulatory Authority: Regulator: Ms. CONNIE MCHALE -(804)726-7666
Categories: Child Caring Institution
Independent Living Program

Henrico

NAME: ELIZABETH HOUSE Phone: (804)349-0055 ID: 2427 Closure Reason:: Voluntary
Physical 6304 CHECKER BERRY DRIVE Mailing 613 SHELBY DRIVE Closed Date:
Address: Address: 7/26/2006
Lead Agency: DSS Capacity: 8 Age Served: 11 to 17 Gender Served: Female
Regulatory Authority: Regulator: Ms. CONNIE MCHALE -(804)726-7666
Categories: Child Caring Institution

Henrico

NAME: NEW HAVEN SERVICES FOR YOUTH & FAM Phone: (804)247-2537 ID: 2933 Closure Reason:: Involuntary
Physical 4009 SHILLINGFORD DRIVE Mailing 14331 CLAYBON TERRACE Closed Date:
Address: Address: 7/25/2006
Lead Agency: DSS Capacity: 6 Age Served: 13 to 17 Gender Served: Male
Regulatory Authority: Regulator: Ms. CONNIE MCHALE -(804)726-7666
Categories: Child Caring Institution

Portsmouth

NAME: NEW BEGINNINGS DEVELOPMENT SERVICE Phone: (757)484-0660 ID: 2567 Closure Reason:: Voluntary
Physical 1523 DES MOINES AVENUE Mailing 6738 BURBAGE LANDING CIRCLE Closed Date:
Address: Address: 3/30/2006
Lead Agency: DSS Capacity: 4 Age Served: 13 to 17 Gender Served: Female
Regulatory Authority: Regulator: Ms. CONNIE MCHALE -(804)726-7666
Categories: Child Caring Institution

Interdepartmental Regulation of Childrens Residential Facilities

Closed Applications by Locality (Alpha)

Report Date: 8/30/2006

Richmond (City)

NAME: LIONELS HOME	Phone: (804)303-3283	ID: 2467	Closure Reason:: Involuntary
Physical 10 WEST LANCASTER ROAD	Mailing 303 E. GLADSTONE AVENUE	Closed Date:	
Address:	Address:	6/7/2006	
Lead Agency: DMHMRSAS	Capacity: 8	Age Served: 12 to 18	Gender Served: Male
Regulatory Authority:	Regulator: RALPH E SROUFE -(804)786-9302		
Categories: Child Caring Institution			
